



Hochschule Anhalt
Anhalt University of Applied Sciences
Department of Students Affairs - Dessau
Examination Office

Application of Acceptance for Master Thesis

Master thesis in

SS

[Summer Semester]

WS

[Winter Semester]

Surname/family name

(student)

(Enter exactly as contained in your passport)

First/given name(s)

(student)

(Enter exactly as contained in your passport)

Matrikel number

(Register number)

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I intend to write my thesis with the following Professor:

Professor

(Title and name first tutor)

I have personally consulted this Professor.

Dessau, _____

Date

Signature Professor (first tutor)

Dessau, _____

Date

Signature Student

The application of acceptance for the master thesis has to be documented in a separate record of the examination office after the personal presentation of this form.